

# CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED 6/24/06		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend	*		*		*		
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2		1					52						
3		1					53						
4		1					54						
5		1					55						
6		1					56						
7		1					57						
8		1					58						
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10	1						60						
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14	1	1					64						
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44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total							Total						
Indep	3						Indep						
Total							Total						
Depend	17						Depend						
Total							Total						
Claims	80						Claims						